Form 19

(Regulation 20)

(In typescript and completed in duplicate)



**THE PATENTS AND COMPANIES REGISTRATION AGENCY**

**The Companies Act, 2017**

**(Act No. 10 of 2017)**

**\_\_\_\_\_\_\_\_\_\_\_\_**

**The Companies (Prescribed Forms) Regulations, 2018**

***(Section 190 and 191)***

***Available at*** [***www.pacra.org.zm***](http://www.pacra.org.zm)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NOTICE OF TRANSMISSION OF SHARES** | | | | | | | | | | | | | | | |
| **PART A**  **COMPANY DETAILS** | | | | | | | | | | | | | | | |
|  | Company Number  *Indicate the 12 digit registration number* | | | | | |  | | | | | | | |  |
|  | Company Name  *Indicate the name as captured on the certificate of incorporation* | | | | | |  | | | | | | | |  |
|  | Phone Number  *Include the international code (e.g. +260 for Zambia)* | | | | | *Mobile* |  | | | | | | | |  |
| *Landline* |  | | | | | | | |
|  | Email Address | | | | | |  | | | | | | | |  |
| **PART B**  **PERSON FROM WHOM SHARES ARE TRANSMITTED** | | | | | | | | | | | | | | | |
| **PARTICULARS OF SHAREHOLDER** | | | | | | | | | | | | | | |  |
|  | | First Name | | | | |  | | | | | | | |  |
| Surname | | | | |  | | | | | | | |
| Gender | | | | |  | | | | | | | |
| Date of Birth | | | | |  | | | | | | | |
| Nationality | | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | | |  | | | | | | | |  |
| Identity Number | | | | |  | | | | | | | |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | | |  | | | | | | | |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Phone Number | | *Mobile* | | |  | | | | | | | |  |
| *Landline* | | |  | | | | | | | |
| Email Address | | | | |  | | | | | | | |  |
| Physical Address | | *Plot/House/ Village* | | |  | | | | | | | |  |
| *Street* | | |  | | | | | | | |
| *Area* | | |  | | | | | | | |
| *Town* | | |  | | | | | | | |
| *Province* | | |  | | | | | | | |
| *Country* | | |  | | | | | | | |
|  | | Number of Shares | | *Shares held before transmission* | | |  | | | | | | | |  |
| *Shares transmitted* | | |  | | | | | | | |
| *Shares held after transmission* | | |  | | | | | | | |
|  | | Class of Shares | | | | |  | | | | | | | |  |
|  | | Numbering of Shares  *Indicate numbering of shares as in the Company Register of Shares* | | | | |  | | | | | | | |  |
| From |  | | To | |  | |  |  |
|  | | | | | | | |  |
| **PARTICULARS OF BENEFICIAL OWNERSHIP** | | | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | |  |
|  | | First Name | | | | |  | | | | | | | |  |
| Surname | | | | |  | | | | | | | |
| Gender | | | | |  | | | | | | | |
| Date of Birth | | | | |  | | | | | | | |
| Nationality | | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | | |  | | | | | | | |  |
| Identity Number | | | | |  | | | | | | | |
| Occupation | | | | |  | | | | | | | |  |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | | |  | | | | | | | |  |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Phone Number | | | *Mobile* | |  | | | | | | | |  |
| *Landline* | |  | | | | | | | |
| Email Address | | | | |  | | | | | | | |  |
| Physical/ Registered Office Address | | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
| **DIRECTOR/TRUSTEE OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | | | *Surname:* | | | | *Identity Number:* | | | | *Date Appointed:* |
| *1* |  | | | |  | | | |  | | | |  |
| *2* |  | | | |  | | | |  | | | |  |
| *3* |  | | | |  | | | |  | | | |  |
| *4* |  | | | |  | | | |  | | | |  |
| **SHAREHOLDER/SETTLER OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | *Identity Number:* | | *Number of Shares:* | | | | *Class of Shares:* | | *Number of Paid Up Shares:* |
| *1* |  | |  | |  | |  | | | |  | |  |
| *2* |  | |  | |  | |  | | | |  | |  |
| *3* |  | |  | |  | |  | | | |  | |  |
| *4* |  | |  | |  | |  | | | |  | |  |
| **BENEFICIAL OWNER/BENEFICIARY OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | | | *Surname:* | | | | *Identity Number:* | | | | *Nature of Interest* |
| *1* |  | | | |  | | | |  | | | |  |
| *2* |  | | | |  | | | |  | | | |  |
| *3* |  | | | |  | | | |  | | | |  |
| *4* |  | | | |  | | | |  | | | |  |
|  | | Number of Shares (if any) | | *Shares held before transmission* | | |  | | | | | | | |  |
| *Shares transmitted* | | |  | | | | | | | |
| *Shares held after transmission* | | |  | | | | | | | |
|  | | Class of Shares (if any) | | | | |  | | | | | | | |
|  | | Nature of Beneficial Ownership  *Briefly explain the nature of beneficial ownership (whether trust, legal arrangement etc.) including how ownership control or economic interest is maintained* | | | | |  | | | | | | | |
|  | | If beneficial owner is politically exposed person (PEP) as defined in the Financial Intelligence Act No. 46 of 2010, provide details (e.g. position held) | | | | |  | | | | | | | |
|  | | DECLARATION  I, whose names appear against the signature below, declare that I am the personal representative of the shareholder indicated on this Form  Signature: Date: | | | | | | | | | | | | | |
| **PART C**  **PERSON TO WHOM SHARES ARE TRANSMITTED** | | | | | | | | | | | | | | | |
| **PARTICULARS OF SHAREHOLDER** | | | | | | | | | | | | | | |  |
|  | | First Name | | | | |  | | | | | | | |  |
| Surname | | | | |  | | | | | | | |
| Gender | | | | |  | | | | | | | |
| Date of Birth | | | | |  | | | | | | | |
| Nationality | | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | | |  | | | | | | | |  |
| Identity Number | | | | |  | | | | | | | |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | | |  | | | | | | | |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Phone Number | | *Mobile* | | |  | | | | | | | |  |
| *Landline* | | |  | | | | | | | |
| Email Address | | | | |  | | | | | | | |  |
| Physical Address | | *Plot/House/ Village* | | |  | | | | | | | |  |
| *Street* | | |  | | | | | | | |
| *Area* | | |  | | | | | | | |
| *Town* | | |  | | | | | | | |
| *Province* | | |  | | | | | | | |
| *Country* | | |  | | | | | | | |
|  | | Number of Shares | | *Shares held before transmission* | | |  | | | | | | | |  |
| *Shares transmitted* | | |  | | | | | | | |
| *Shares held after transmission* | | |  | | | | | | | |
|  | | Class of Shares | | | | |  | | | | | | | |  |
|  | | Numbering of Shares  *Indicate numbering of shares as in the Company Register of Shares* | | | | |  | | | | | | | |  |
| From |  | | To | |  | |  |  |
|  | | | | | | | |  |
|  | | DECLARATION  I, whose names appear on this form, acknowledge receipt of shares indicated on this form and that the beneficial ownership information provided is true and accurate.  Signature: Date: | | | | | | | | | | | | | |
| **PARTICULARS OF BENEFICIAL OWNERSHIP** | | | | | | | | | | | | | | |  |
|  | | First Name | | | | |  | | | | | | | |  |
| Surname | | | | |  | | | | | | | |
| Gender | | | | |  | | | | | | | |
| Date of Birth | | | | |  | | | | | | | |
| Nationality | | | | |  | | | | | | | |  |
| Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | | |  | | | | | | | |  |
| Identity Number | | | | |  | | | | | | | |
| Occupation | | | | |  | | | | | | | |  |
| Name of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Nature of Body Corporate  *Where applicant is a Body Corporate, indicate whether applicant is a Company, Co-operative, Trust, Society, Etc.* | | | | |  | | | | | | | |  |
| Registration Number, Date and Country of Incorporation of Body Corporate  *Where applicant is a Body Corporate* | | | | |  | | | | | | | |  |
| Phone Number | | | *Mobile* | |  | | | | | | | |  |
| *Landline* | |  | | | | | | | |
| Email Address | | | | |  | | | | | | | |  |
| Physical/ Registered Office Address | | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
| **DIRECTOR/TRUSTEE OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | | | *Surname:* | | | | *Identity Number:* | | | | *Date Appointed:* |
| *1* |  | | | |  | | | |  | | | |  |
| *2* |  | | | |  | | | |  | | | |  |
| *3* |  | | | |  | | | |  | | | |  |
| *4* |  | | | |  | | | |  | | | |  |
| **SHAREHOLDER/SETTLER OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | *Surname:* | | *Identity Number:* | | *Number of Shares:* | | | | *Class of Shares:* | | *Number of Paid Up Shares:* |
| *1* |  | |  | |  | |  | | | |  | |  |
| *2* |  | |  | |  | |  | | | |  | |  |
| *3* |  | |  | |  | |  | | | |  | |  |
| *4* |  | |  | |  | |  | | | |  | |  |
| **BENEFICIAL OWNER/BENEFICIARY OF BODY CORPORATE** | | | | | | | | | | | | | | | |
|  | | *No* | *First Name:* | | | | *Surname:* | | | | *Identity Number:* | | | | *Nature of Interest* |
| *1* |  | | | |  | | | |  | | | |  |
| *2* |  | | | |  | | | |  | | | |  |
| *3* |  | | | |  | | | |  | | | |  |
| *4* |  | | | |  | | | |  | | | |  |
|  | | Number of Shares (if any) | | *Shares held before being acquired* | | |  | | | | | | | |  |
| *Shares acquired* | | |  | | | | | | | |
| *Shares remaining after being acquired* | | |  | | | | | | | |
|  | | Class of Shares (if any) | | | | |  | | | | | | | |
|  | | Nature of Beneficial Ownership  *Briefly explain the nature of beneficial ownership (whether trust, legal arrangement etc.) including how ownership control or economic interest is maintained* | | | | |  | | | | | | | |
|  | | If beneficial owner is politically exposed person (PEP) as defined in the Financial Intelligence Act No. 46 of 2010, provide details (e.g. position held) | | | | |  | | | | | | | |
| **PART D**  **PARTICULARS OF PERSON LODGING DOCUMENT** | | | | | | | | | | | | | | | |
|  | | First Name | | | | |  | | | | | | | |  |
|  | | Surname | | | | |  | | | | | | | |
|  | | Gender | | | | |  | | | | | | | |
|  | | Date of Birth | | | | |  | | | | | | | |
|  | | Nationality | | | | |  | | | | | | | |  |
|  | | Identity Type  For Zambians: *NRC*  For non-Zambians: *NRC/Passport/ Driver’s Licence/Resident Permit* | | | | |  | | | | | | | |  |
|  | | Identity Number | | | | |  | | | | | | | |
|  | | Phone Number | | | *Mobile* | |  | | | | | | | |
| *Landline* | |  | | | | | | | |
|  | | Email Address | | | | |  | | | | | | | |  |
|  | | Physical Address | | | *Plot/House/ Village* | |  | | | | | | | |  |
| *Street* | |  | | | | | | | |
| *Area* | |  | | | | | | | |
| *Town* | |  | | | | | | | |
| *Province* | |  | | | | | | | |
| *Country* | |  | | | | | | | |
|  | | Signature: Date: | | | | | | | | | | | | | |
| *To be completed by a Personal Represerntative. Attach copy of identity documents. In the case of transmission as a result of death, the instrument appointing a personal representative must be attached.* | | | | | | | | | | | | | | | |